VILLAGE OF EMPIRE APPLICATION FOR FENCE PERMIT

Date:		Fee:
Name of Owner/Applic	eant:	
		Telephone:
		Fax:
		Parcel # 45-041
Location of Fence:		
		TIONS OF STRUCTURE. LOCATION OF S AND/OR STRUCTURES AND LOT
SIGNATURE OF APP	LICANT	
APPROVED	DISAPPROVED	
CIOLLETTE CE ZO	NING ADMINISTRATOR	DATE